PHA 5-Year and Annual Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information	-0.2.0000040000			DITT (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	PHA Name:Eastern Regional Housing A	uthority		Cton doc-d	PHA Code: NM063	5	
		Performing		Standard	☐ HCV (Section 8)		
	PHA Fiscal Year Beginning: (MM/YYYY):	07/2010_					
2.0	Inventory (based on ACC units at time of F	Y beginning	in 1.0 above)				
2.0	Number of PH units:85			Number of Ho	CV units:1850		
3.0	Submission Type		000 MARCO NO.		- 507.000 Later 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Annual I	Plan Only		5-Year Plan Only		
4.0							
4.0	PHA Consortia	HA Consorti	a: (Check box if	submitting a join	nt Plan and complete table belo	ow.)	
		T	T			No. of Unit	s in Each
	Portioinating DHAs	PHA		ncluded in the	Programs Not in the	Program	
	Participating PHAs	Code	Consortia		Consortia	PH	HCV
	DITA 1.	-				+	
	PHA 1: PHA 2:						
	PHA 2: PHA 3:						
5.0	5-Year Plan. Complete items 5.1 and 5.2 or	alv at 5-Vear	Plan undate				
5.0	5-Year Plan. Complete items 3.1 and 3.2 of	ny at 3-1 cai	r iaii update.				
5.1	Mission. State the PHA's Mission for servi	ng the needs	of low-income	very low-income	and extremely low income fa	milies in the P	HA's
5.1	jurisdiction for the next five years: Eastern	Regional Hou	using Authority	will promote ade	equate and affordable housing,	economic opp	ortunity and a
	suitable living environment free from discri		asing ruanority	min promote au-	4		•
	Suitable fiving environment free from diser-	inniacion.					
5.2	Goals and Objectives. Identify the PHA's	quantifiable s	goals and objecti	ives that will ena	able the PHA to serve the need	s of low-incom	e and very
3.2	low-income and extremely low-income fan	rilies for the r	next five years.	Include a report	on the progress the PHA has n	nade in meeting	g the goals
	and objectives described in the previous 5-Y	ear Plan. Ea	stern Regional F	Housing Authorit	ty goals: Expand the supply of	assisted housi	ng, improve
	the quality of assisted housing and promote	self-sufficien	cv of families ar	nd individuals.	The Eastern Regional Housing	Authority has	increased its
	capacity consuming additional Housing Cho	pice Voucher	increments, incr	easing the active	Family Self Sufficiency partic	cipants, increas	sing the
	Family Self Sufficiency escrow accounts, in	creasing Sect	tion 8 Homeown	ership and assist	ting troubled Housing Authorit	ties. The Easte	rn Regional
	Housing Authority has leveraged with Foun	dation for Bu	ilding to promot	te homeownersh	ip opportunities which are non	Section 8.	
					100 A000		
	PHA Plan Update						
6.0							
	(a) Identify all PHA Plan elements that have	ve been revise	ed by the PHA si	ince its last Anni	ual Plan submission: Not App	licable	
	(b) Identify the specific location(s) where t	he public may	y obtain copies o	of the 5-Year and	Annual PHA Plan. For a com	iplete list of Pl	AA Plan
	elements, see Section 6.0 of the instruct	ions. Eastern	Regional Housi	ing Authority, 10	06 E. Reed, Roswell, NM 8820	3 and Sandsto	ne Manor
	Apartments, 16 A Stacy Drive, Roswell	, NM 88203					
7.0	Hope VI, Mixed Finance Modernization	or Developm	ent, Demolition	and/or Disposi	ition, Conversion of Public H	ousing, Home	ownership
1.0	Programs, and Project-based Vouchers.	Include state	ments related to	these programs	as applicable. Easiern Region	iai riousing Au J. Forgolomura	Counsalina
	currently administers the Section 8 Homeov	wnership Prog	gram to include .	Homebuyer Cou	nsetting, Creati Counsetting and	a r oreciosure	Counseling
-		0.1.1	-1.021	bla			
8.0	Capital Improvements. Please complete I	arts 8.1 throu	ign 8.3, as appile	cable.			
	G THE ID THE	4/Danf	as and Fuely - 4	on Dancet A.	part of the DHA 5 Veer and A	nnual Plan ani	mally
8.1	Capital Fund Program Annual Statemen	vreriorman	Ctatamant/Danfa	rmanca and Fun	part of the FTIA 3- I car and A	075 1 for each	current and
1	complete and submit the Capital Fund Prog	gram Annual	statement/Perfo	rmance ana Eva	пианоп керогі, юнн ноD-300	075.1, 101 each	current and
	open CFP grant and CFFP financing.						
-	Capital Fund Program Five-Year Action	Dlan Acno	rt of the cubmics	ion of the Annu	al Plan PHAs must complete s	and submit the	Capital Fund
8.2	Program Five-Year Action Plan, form HUI	1 Fian. As pa	d cubecuant an	nual undates (on	a rolling basis e g drop curr	ent vear and a	dd latest vear
	for a five year period). Large capital items	must be inclu	ided in the Five-	Year Action Pla	n	on your, and a	aa most youl
	for a five year period). Large capital items	must be men	ided in the Five-	real Action Fla	•••		
-	Canital Fund Financing Duagnam (CEEE	n					
8.3	Capital Fund Financing Program (CFFF ☐ Check if the PHA proposes to use any p	ortion of its	Canital Fund Pro	oram (CFP)/Rer	placement Housing Factor (RH	F) to renay del	ot incurred to
	finance capital improvements.	ortion or its (capital Fulla F10	Siam (CII)//(CI	Autorition in the state of the	. ,	
	imance capital improvements.						
1	I						

- Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. The Housing needs of families is a lack of affordable housing in all jurisdictions.
- Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Eastern Regional Housing Authority currently sets the Payment Standards at 110% of the Fair Market Rents. The Housing Authority regularly communicates with landlords in negotiating reasonable rents to the constituents of the Program.

Additional Information. Describe the following, as well as any additional information HUD has requested.

- (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. Eastern Regional Housing Authority has leveraged with other agencies to promote low income Home Ownership opportunities. The Housing Authority utilizes the Capital Fund Program to modernize its Public Housing Property. The Authority has an ongoing Section 8 Family Self Sufficiency Program with over 50% of the participants receiving escrow funds and several constituents graduating off of the Program.
 - (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" The Eastern Regional Housing Authority defines "Significant Amendment" as a change that alters the basic provision of service and defines "Substantial Deviation/Modification" as a complete revision of major policy or procedure.
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
 - (g) Challenged Elements
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

17 1400	16 1495	15 1492	14 1485	13 1475	12 1470	11 1465	10 1460	9 1450	8 1440	7 1430	6 1415	5 1411	4 1410	3 1408	2 1406	1 Total		Line Sum	Type of Grant ⊠ Original Annual Statement □ Performance and Evaluatio	PHA Name: East Authority	Part I: Summary
1499 Development Activities 4	1495.1 Relocation Costs	1492 Moving to Work Demonstration	1485 Demolition	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	1460 Dwelling Structures	1450 Site Improvement	1440 Site Acquisition	1430 Fees and Costs	1415 Liquidated Damages	1411 Audit	1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21) 3	Total non-CFP Funds		Summary by Development Account	[n Report	PHA Name: Eastern Regional Housing Authority	ry
2		nstration		nt	o,	-Nonexpendable							t exceed 10% of line 21)	ents	xeed 20% of line 21) 3			Account	☐ Reserve for Disasters/Emergencies for Period Ending:	Grant Type and Number Capital Fund Program Grant No: NM02P06350110 Replacement Housing Factor Grant No: Date of CFFP:	
						13755	34337	13500		5000		1500	5000	7260	70000		Original			P06350110	
																	7	Total Estimated Cost			
																	Revised ²	ated Cost	Revised Annual Statement (revision no: Final Performance and Evaluation Report		
																	Obligated		revision no: luation Report		
																	Exp	Total Actual Cost		FFY of G	
																	Expended	ost '	•	FFY of Grant: 2010 FFY of Grant Approval: 2010	

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⁴ RHF funds shall be included here.

Date	sing Director	Signature of Public Housing Director	Date 3/27/10	Signature of Executive Director	ure of Exe	Signat
				Amount of line 20 Related to Energy Conservation Measures	Amount	25
			61592	Amount of line 20 Related to Security - Hard Costs	Amount	24
			88760	Amount of line 20 Related to Security - Soft Costs	Amount	23
				Amount of line 20 Related to Section 504 Activities	Amount	22
				Amount of line 20 Related to LBP Activities	Amount	21
			150352	Amount of Annual Grant:: (sum of lines 2 - 19)	Amount	20
				1502 Contingency (may not exceed 8% of line 20)	1502 Cor	19
				9000 Collateralization or Debt Service paid Via System of Direct Payment	9000 Col	18ba
				1501 Collateralization or Debt Service paid by the PHA	1501 Col	18a
Expended	Obligated	Revised ²	Original			
Total Actual Cost	١.	Total Estimated Cost	T	Summary by Development Account	Summar	Line
	Final Performance and Evaluation Report	☐ Final		Performance and Evaluation Report for Period Ending:	formance an	Per
•	Revised Annual Statement (revision no:	☐ Revise	ergencies	Statement Reserve for Disasters/Emergencies	e of Grant Original Annual Statement	Type of Grant Original
	FFY of Grant:2010 FFY of Grant Approval: 2010	2		Grant Type and Number Capital Fund Program Grant No: NM02P06350110 Replacement Housing Factor Grant No: Date of CFFP:	PHA Name: Eastern Regional Housing Authority	PHA Name: Eastern Reg Housing Au
					Part I: Summary	Part I:

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PHA Name: Fastern Regional Housing Authority		Grant Type and Number	24		Federal F	Federal FFY of Grant: 2010	10	
FIIA Name, Lastem Neg		Capital Fund Program Grant No: NM02P06350110 CFFP (Yes/ No): No	ant No: NM02P06350	110				
	2	Replacement Housing Factor Grant No:	ctor Grant No:					
Development Number Name/PHA-Wide	General Description of Major Work Categories	ork Development Account No.	nt Quantity	Total Estimated Cost	ed Cost	Total Actual Cost	Cost	Status of Work
Activities				-			Eunda	
				Original	Revised '	Funds Obligated ²	Expended ²	
NM02P063	Operations	1406		70000				
NM02P063	Management Improvements / Training	ing 1408		7260				
NM02P063	Administration	1410		5000				
NM02P063	Audit Costs	1411		1500				
NM02P063	Fees and Costs	1430		5000				
NM02P063	Kitchen Cabinets	1460		11087				
NM02P063	Kitchen Sinks	1460		2500				
NM02P063	Metal Storage Doors	1460	10	6750				
NM02P063	A/C Reconditioning	1460	84	14000				
NM02P063	Range Hoods	1465.1	25	955				
NM02P063	Stoves	1465.1	32	7500				
NM02P063	Refrigerators	1465.1	32	5300				
NM02P063	Fencing	1450		13500				
NM02P063	A/C Reconditioning	1460	84	14000				

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										Activities	Development Number		PHA Name:	Part II: Supporting Pages
										q	General Description of Major Work Categories	R C	0	
											ork	Capital Fur CFFP (Yes Replaceme	Frant Typ	
											Development Account No.	Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	e and Number	
											Quantity	ant No:		
									Original		Total Estimated Cost			
									Revised '		ited Cost		Federal	
									Funds Obligated ²		Total Actual Cost		Federal FFY of Grant:	
									Funds Expended ²		Cost			
											Status of Work			

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Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program			
PHA Name:		c			Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Eastern Regional Housing Authority	edule for Capital Fund al Housing Authority	Financing Program			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NM02P063	6/2012		6/2014		

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Page1 ⁴RHF funds shall be included here.

> U.S. Department of Housing and Urban Development
> Office of Public and Indian Housing
> OMB No. 2577-0226 Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Annual Statement/Performance and Evaluation Report

Part I:	Part I: Summary				PRES. CO. 12000
Authority	Authority Grant Type and Number Capital Fund Program Grant No: NM02S06350109 Replacement Housing Factor Grant No: Date of CFFP:	806350109			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant Original A	nnual Statement		Revised Annual Statement (revision no:	ised Annual Statement (revision no:	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
-	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3				
ω	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	2000	14765	14765	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	4000	0		
∞	1440 Site Acquisition				
9	1450 Site Improvement	94000	0		
10	1460 Dwelling Structures	90689	139304		
Ξ	1465.1 Dwelling Equipment—Nonexpendable	0	36620		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

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Part I: Summary	ummary			
PHA Name: Eastern Regional Authority	egional Capital Fund Program Grant No: NM02S06350109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant	rant			
Origi	Original Annual Statement Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: 1	•
Perfo	Performance and Evaluation Report for Period Ending:	П	Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total	Total Actual Cost 1
		Original Revised ²	ed ² Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment			
19	1502 Contingency (may not exceed 8% of line 20)			
20	Amount of Annual Grant:: (sum of lines 2 - 19)	190689 190689	14765	
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Activities			
23	Amount of line 20 Related to Security - Soft Costs	6000 0		
24	Amount of line 20 Related to Security - Hard Costs	176739		
25	Amount of line 20 Related to Energy Conservation Measures	7950		
Signatur	Signature of Executive Director	Date Signature of Public Housing Director	Housing Director	Date

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Part II: Supporting Pages									
PHA Name: Eastern Regional Housing Authority	ional Housing Authority	Grant Ty Capital Fu CFFP (Ye Replacem	Grant Type and Number Capital Fund Program Grant No: NM02S06350109 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	:: NM02S06350 rant No:	1109	Federal	Federal FFY of Grant: 2009	09	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
NM02P063	Administration		1410		2000	14765			
NM02P063	Paint Units		`1460	25	13489	0			
NM02P063	Install Water Saving Fixtures		1460	25	7950	0			
NM02P063	Eco Scaping		1450		60000	0			
NM02P063	Repave Parking Lots		1450		34000	0			
NM02P063	Fees & Costs		1430		4000	0			
NM02P063	Replace Kitchen Cabinets		1460	28	69250	86996			
	Replace Exterior Doors		1460	92	0	39468			
	Replace Stoves		1465.1	34	0	15980			
	Replace Refrigerators		1465.1	43	0	20640			
	Replace Water Heaters		1460	24	0	12840			
-									

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Part II: Supporting Pages PHA Name:	Ca CF CF	ant Typ pital Fur FP (Yes	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	int No:		Federal F	Federal FFY of Grant:		
Development Number Name/PHA-Wide	General Description of Major Work Categories	ŗ.	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	ost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	

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							NM02P063 0		Development Number Name/PHA-Wide Activities	PHA Name: Eastern Regional Housing Aumonty	Part III: Implementation Schedule for Capital Fund Financing Program
							03/17/2010	Original Obligation End Date	All Fund (Quarter E	ousing Aumority	le for Capital Fund
								Actual Obligation End Date	All Fund Obligated (Quarter Ending Date)		Financing Program
							03/17/2012	Original Expenditure End Date	All Funds (Quarter E		
								Actual Expenditure End Date	All Funds Expended (Quarter Ending Date)		
									Reasons for Revised Target Dates	Federal FFY of Grant: 2009	

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Part III: Implementation Schedule for Capital Fund Financing Program PHA Name:	edule for Capital Fund	Financing Program			Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

PHA Name: Easter	Regional Housing				FFV of Grant: 2009
Authority	Capital Fund Program Grant No: NM02P06350109 Replacement Housing Factor Grant No: Date of CFFP:	P06350109			FFY of Grant Approval: 2009
Type of Grant ☐ Original A ☐ Performan	nnual Statement		☐ Revised Annual Statement (revision no:	ised Annual Statement (revision no:	
Line	Summary by Development Account		Total Estimated Cost	-	Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
-	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	70000	70000	70000	
w	1408 Management Improvements	7260	7260		
4	1410 Administration (may not exceed 10% of line 21)	5000	5000	5000	
S	1411 Audit	1500	1500		
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5000	5000		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	61592	52792		
П	1465.1 Dwelling Equipment—Nonexpendable	0	8800		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

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Signature	25	24	23	22	21	20	19	18ba	18a		Line	Perfor	Origin	Type of Grant	PHA Name: Eastern Regional Housing Authority
Signature of Executive Director	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant:: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending: 12/31/2009	Original Annual Statement Reserve for Disasters/Emergencies	ant	gional Capital Fund Program Grant No: NM02P06350109 Replacement Housing Factor Grant No: Date of CFFP:
Date 3/27/10 S		61592	88760			150352				Original	To		rgencies		
Signature of Public Housing Director										Revised ²	Total Estimated Cost		□Re		
using Director										Obligated		☐ Final Performance and Evaluation Report	Revised Annual Statement (revision no:		FFY of Grant:2009 FFY of Grant Approval: 2009
Date										Expended	Total Actual Cost 1	ation Report	n no:		
te															

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PHA Name: Eastern Regionsl Housing Authority		Grant Type and Nu Capital Fund Prograr CFFP (Yes/ No): No Replacement Housin	Grant Type and Number Capital Fund Program Grant No: NM02P06350109 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	o: NM02P06359	0109	Federal	Federal FFY of Grant: 2009	9	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estim	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
NM02P063	Operations		1406		70000	70000	70000		
NM02P063	Management Improvements / Training	ning	1408		7260	7260			
NM02P063	Administration		1410		5000	5000	5000		
NM02P063	Audit Costs		1411		1500	1500			
NM02P063	Fees and Costs		1430		5000	5000			
NM02P063	Kitchen Cabinets		1460	20	14250	14250			
NM02P063	Water Heaters		1460	38	9887	988			
NM02P063	Range Hoods		1460	25	955	955			
NM02P063	Exhaust Fans		1460	25	875	875			
NM02P063	Kitchen Sinks		1460	15	6875	6875			
NM02P063	Stoves		1460	25	3500	0			
NM02P063	Metal Storage Doors		1460	10	6750	6750			
NM02P063	Refrigerators		1460	25	5300	0			
NM02P063	A/C Reconditioning		1460	84	13200	13200			
NM02P063	Stoves		1465.1	25	0	3500			
NM063	Refrigerators		1465.1	25	0	5300			

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:		Grant Ty Capital Ft CFFP (Yo Replacem	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:		Federal I	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	/ork	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
		1							

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program			
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

							NM02P063		Development Number Name/PHA-Wide Activities	PHA Name: Eastern Regional Housing Authority	Part III: Implementation Schedule for Capital Fund Financing Program
							6/2011	Original Obligation End Date	All Fund (Quarter E	Iousing Authority	le for Capital Fund l
								Actual Obligation End Date	All Fund Obligated (Quarter Ending Date)		Financing Program
							6/2013	Original Expenditure End Date	All Fund (Quarter E		
								Actual Expenditure End Date	All Funds Expended (Quarter Ending Date)		
									Reasons for Revised Target Dates '	Federal FFY of Grant: 2009	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Part I: 9	Part I: Summary				
PHA Nan	n Regional				FFY of Grant: 2008
Housing .	Housing Authority Capital Fund Program Grant No: NM02P06350108 Replacement Housing Factor Grant No: Date of CFFP:	06350108			FFY of Grant Approval: 2008
Type of Grant Original A	nnual Statement		Revised Annual Statement (revision no:	nt (revision no:	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds			X.	
2	1406 Operations (may not exceed 20% of line 21) 3	70000		70000	70000
ω	1408 Management Improvements	7260		1259	1259
4	1410 Administration (may not exceed 10% of line 21)	5000		5000	
5	1411 Audit	1500			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	3500		25	20.15
∞	1440 Site Acquisition				
9	1450 Site Improvement	6000		3700	3698
10	1460 Dwelling Structures	57387			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴RHF funds shall be included here.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

Part I: Summary PHA Name: Eastern Regional Housing Authority				EFY o	of Grant:2001	FFY of Grant:2008 FFY of Grant Approval: 2008
	Date of CFFP:					
Type of Grant	ant					
Origi	Original Annual Statement Reserve for Disasters/Emergencies	ncies	Rev	ised Annual S	taten	Revised Annual Statement (revision no:
⊠ Perfo	Performance and Evaluation Report for Period Ending: 12/31/2009			Final Perfo	rmanc] Final Performance and Evaluation Report
Line	Summary by Development Account	Tota	Total Estimated Cost			Total Actual Cost 1
		Original	Revised 2			Obligated
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	150647				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities	14000				
23	Amount of line 20 Related to Security - Soft Costs	87260				
24	Amount of line 20 Related to Security - Hard Costs	49387				
25	Amount of line 20 Related to Energy Conservation Measures					
Signatui	Signature of Executive Director Date	Date Signal Signal	Signature of Public Housing Director	sing I	director	Director
		AS ILLE				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

PHA Name: Region VI Housing Authority		Grant Type and Number Capital Fund Program Grant No: NM02P06350108 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	t No: NM02P06350	0108	Federal F	Federal FFY of Grant: 2008	008	
Development Number Name/PHA-Wide	General Description of Major Work Categories	ork Development Account No.	Quantity	Total Estima	l Estimated Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
NM02P063	Operations	1406		70000		70000	70000	
NM02P063	Management Improvements / Training	ng 1408		7260		1259	1259	
NM02P063	Administration	1410		5000		5000		
NM02P063	Audit Costs	1411		1500				
NM02P063	Fees and Costs	1430		3500		25	20.15	
NM02P063	Kitchen Cabinets	1460		11700				
NM02P063	Water Heaters	1460		9900				
NM02P063	Range Hoods	1460		1000				
NM02P063	Exhaust Fans	1460		1200				
NM02P063	Storm Doors	1460		2542				
NM02P063	504 Compliance	1460		14000				
NM02P063	Stoves	1460		3500				
NM02P063	Interior Doors	1460		4500				
NM02P063	Storage Doors	1460		1540				
NM02P063	Refrigerators	1460		1750				
NM02P063	Replace Windows	1460		5755				
NM02P063	Storage Unit for Capitan	1450		6000		3700	.3698	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:		Grant Ty Capital Fu CFFP (Ye Replacem	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:		Federal F	Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	/ork	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	ost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
1 To be of	To be completed for the Performance and Evaluation Report or a Revised Annual Statement	Penort or a	Daviced Annual Statemer	4					

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund	Financing Program			
PHA Name: Eastern Regional Housing Authority	l Housing Authority				Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates 1
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NM02P063	06/12/2010		06/12/2012		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund	Financing Program			
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter F	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

Part I: Summary	ummary					
PHA Name: Eastern Houisng Authority	PHA Name: Eastern Regional Houising Authority Grant Type and Number Capital Fund Program Grant No: NM02P06350107 Replacement Housing Factor Grant No: Date of CFFP:	06350107				FFY of Grant: 2007 FFY of Grant Approval: 2007
Type of Grant	nnual Statement		ū	Revised Annual Statement (revision no:	nt (revision no:	
Line	Summary by Development Account		Total Estimated Cost	ated Cost		Total Actual Cost 1
		Original		Revised ²	Obligated	Expended
_	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) 3	70000			70000	70000
w	1408 Management Improvements	5000			5000	4982.82
4	1410 Administration (may not exceed 10% of line 21)	5000			5000	
5	1411 Audit	1500			1500	
6	1415 Liquidated Damages					
7	1430 Fees and Costs	3500			3500	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	64665			64665	34586.58
=	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities 4					

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

Date	Director	Signature of Public Housing Director	Date 3/37/10 Signate	Signature of Executive Director Date	ature of Exe	Signa
				Amount of line 20 Related to Energy Conservation Measures	Amount	25
10300	10300		50665	Amount of line 20 Related to Security - Hard Costs	Amount	24
70000	70000		85000	Amount of line 20 Related to Security - Soft Costs	Amount	23
			14000	Amount of line 20 Related to Section 504 Activities	Amount	22
				Amount of line 20 Related to LBP Activities	Amount	21
	149665		149665	Amount of Annual Grant:: (sum of lines 2 - 19)	Amount	20
				1502 Contingency (may not exceed 8% of line 20)	1502 Cor	19
				9000 Collateralization or Debt Service paid Via System of Direct Payment	9000 Col	18ba
				1501 Collateralization or Debt Service paid by the PHA	1501 Col	18a
Expended	Obligated	Revised 2	Original			
Total Actual Cost 1	Total	Total Estimated Cost	Total Esti	Summary by Development Account	Summar	Line
port	Final Performance and Evaluation Report	☐ Fina		Performance and Evaluation Report for Period Ending: 12/31/2009	erformance an	X
J	Revised Annual Statement (revision no:	☐ Revised /	cies	al Statement ☐ Reserve for Disasters/Emergencies	Original Annual Statement	
					Type of Grant	Type
	FFY of Grant:2007 FFY of Grant Approval: 2007	FFY		Grant Type and Number Capital Fund Program Grant No: NM02P06350107 Replacement Housing Factor Grant No: Date of CFFP:	PHA Name: Eastern Regional Housing Authority	PHA Name: Eastern Reg Housing Aut
					Part I: Summary	Part

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

PHA Name: Eastern KegionalHousing Aumority	JonalHousing Authority	Capital Fund Program Grant No: NM02P06350107 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	nt No: NM02P06350 or Grant No:	107	Foucial	reueral FF E Of Grant, 2000		
Development Number Name/PHA-Wide	General Description of Major Work Categories	Work Development Account No.	Quantity	Total Estimated Cost	ited Cost	Total Actual Cost	Cost	Status of Work
COUNTRO				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
NM02P063	Operations	1406		70000		70000	70000	Completed
NM02P063	Management Improvements	1408		5000		5000	4982.82	
NM02P063	Administration	1410		5000		5000		
NM02P063	Audit Costs	1411		1500		1500		
NM02P063	Fees and Costs	1430		3500		3500		
NM02P063	Kitchen Cabinets	1460		13000		13000	23493.36	
NM02P063	Water Heaters	1460		10000		10000		
NM02P063	Range Hoods	1460		1000		1000		
NM02P063	Exhaust Fans	1460		1200		1200		
NM02P063	Storm Doors	1460		1560		1560		
NM02P063	504 Compliance	1460		14000		14000		
NM02P063	Stoves	1460		3500		3500	336.97	
NM02P063	Interior Doors	1460		4500		4500		
NM02P063	Storage Doors	1460		2400		2400		
NM02P063	Refrigerators	1460		1750		1750	456.25)
NM02P063	Replace Windows	1460		11755		11755	10300	Completed

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:	- G	apital Fu	Grant Type and Number Capital Fund Program Grant No			Federal	Federal FFY of Grant:		
	0	FFP (Yes	CFFP (Yes/ No):						
	R	teplaceme	Replacement Housing Factor Grant No:	ant No:					
							7		Ctata af Wall
Development Number Name/PHA-Wide	General Description of Major Work Categories	ork	Account No.	Quantity	I otal Estima	Estimated Cost	Total Actual Cost	180	Status of Work
Achalica					Original	Revised 1	Funds	Funds	
							Obligated ²	Expended ²	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

							NM02P063		Activities	Development Number	PHA Name: Eastern Regional Housing Authority	Part III: Implementation Schedule for Capital Fund Financing Program
							9/12/2009	Original Obligation End Date	(Zumrei E	All Fund	l Housing Authority	edule for Capital Fund
								Actual Obligation End Date	(Zuanzi Enanig Paw)	All Fund Obligated		Financing Program
							9/12/2011	Original Expenditure End Date	(Zum sz.	All Fund		
								Actual Expenditure End Date	(Zam sor Emerilg Euro)	All Funds Expended		
										Reasons for Revised Target Dates	Federal FFY of Grant: 2007	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

									Development Number Name/PHA-Wide Activities	PHA Name:	Part III: Implementation Schedule for Capital Fund Financing Program
								Original Obligation End Date	All Fund (Quarter E		edule for Capital Fund
								Actual Obligation End Date	All Fund Obligated (Quarter Ending Date)		Financing Program
								Original Expenditure End Date	All Fund (Quarter I		
								Actual Expenditure End Date	All Funds Expended (Quarter Ending Date)		
									Reasons for Revised Target Dates 1	Federal FFY of Grant:	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

PHA Name: Eastern Authority	PHA Name: Eastern Regional Housing Authority Grant Type and Number Capital Fund Program Grant No: NM02P06350106 Replacement Housing Factor Grant No: Date of CFFP:	06350106			FFY of Grant: 2006 FFY of Grant Approval: 2006
Type of Grant ☐ Original A	pe of Grant □ Reserve for Disasters/Emergencies		☐ Revised Annual Statement (revision no:	nt (revision no:	
Perfor	☑ Performance and Evaluation Report for Period Ending: 12/31/2009 Summary by Development Account Output Development Account Development		Final Performance	Final Performance and Evaluation Report	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost
	Total non-CFP Funds	Original	Revised ²	Obligated	Expended
2	1406 Operations (may not exceed 20% of line 21) 3	84413		84413	84413
ω	1408 Management Improvements	6759		6759	6678.30
4	1410 Administration (may not exceed 10% of line 21)	3030		3030	1129
5	1411 Audit	1500		1500	
6	1415 Liquidated Damages				
7	1430 Fees and Costs	2500		2500	1952.16
8	1440 Site Acquisition				
9	1450 Site Improvement	8500		8500	5115
10	1460 Dwelling Structures	38207		38207	35641.88
Ξ	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	4800		4800	4800
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴RHF funds shall be included here.

Tailli Sullillary	ummary					
PHA Name: Eastern Regional Housing Authority	e: Grant Type and Number Capital Fund Program Grant No: NM02P06350106 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant Approval: 2006	roval: 2006	
Type of Grant	ant					
Origin	Original Annual Statement Reserve for Disasters/Emergencies	ties	□Re	Revised Annual Statement (revision no:	ent (revision no:)
N Perfor	Performance and Evaluation Report for Period Ending: 12/31/2008			☐ Final Performance	☐ Final Performance and Evaluation Report	•
Line	Summary by Development Account	Tot	Total Estimated Cost		Total A	Total Actual Cost 1
		Original	Revised ²		Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	149709				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities	14000				
23	Amount of line 20 Related to Security - Soft Costs	98202				
24	Amount of line 20 Related to Security - Hard Costs	37507				
25	Amount of line 20 Related to Energy Conservation Measures					
Signature	Signature of Executive Director Date	Date $3 27/10$ Si	Signature of Public Housing Director	using Director		Date

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

	Part II: Supporting Pages	es							
nber General Description of Major Work Categories Development Account No. Quantity Total Estimated Cost Total Actual Cost Total Actual Cost Development Categories Account No. Original Revised¹ Funds Obligated² Expended² Management Improvements 1406 84413 84413 84413 84413 Audit Costs 1410 3030 3030 1129 Parking for Capitan 1450 2500 2500 1952.16 Ritchen Cabinets 1460 8500 8500 5000 5000 5000 5000 675.88 Stoves Refrigerators 1460 1500 1500 3000 1500 306.92 1500 </th <th>PHA Name: Eastern Re</th> <th>gional Housing Authority</th> <th>Grant Type and Number Capital Fund Program Gran CFFP (Yes/ No): No Replacement Housing Factor</th> <th>ıt No: NM02P06350 or Grant No:</th> <th>0106</th> <th>Federall</th> <th>FFY of Grant: 20</th> <th>006</th> <th></th>	PHA Name: Eastern Re	gional Housing Authority	Grant Type and Number Capital Fund Program Gran CFFP (Yes/ No): No Replacement Housing Factor	ıt No: NM02P06350 or Grant No:	0106	Federall	FFY of Grant: 20	006	
Operations 1406 84413 Revised I Obligated ² Funds Obligated ² Management Improvements 1408 6759 6759 6759 Administration 1410 3030 3030 3030 Audit Costs 1411 1500 1500 1500 Fees and Costs 1430 2500 2500 2500 Parking for Capitan 1450 8500 8500 8500 Kitchen Cabinets 1460 6336 6336 6336 Water Heaters 1460 5000 5000 5000 Stoves 1460 750 750 750 Refrigerators 1460 3000 3000 3000 Storage Doors 1460 3121 3121 3121	Development Number Name/PHA-Wide Activities	General Description of Major V Categories		Quantity	200	ited Cost	Total Actual	Cost	Status of Work
Inprovements 1406 84413 84413 Inprovements 1408 6759 6759 Introduction 1410 3030 3030 Introduction 1430 2500 1500 Introduction 1450 8500 8500 Introduction 1460 5000 5000 Introduction 1500 1500 1500 Introduction 1460 3000 3000 Introduction 3121 3121 Introduction 3121 3121					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
Inprovements 1408 6759 6759 1410 3030 3030 3030 1411 1500 1500 1500 1430 2500 2500 2500 2500 8500 8500 8500 2500 8500 8500 8500 2500 5000 5000 5000 1460 750 750 750 1460 3000 3000 3000 1460 3121 3121 3121		Operations	1406		84413		84413	84413	
1410 3030 3030 1411 1500 1500 1430 2500 2500 2500 2500 2500 1450 8500 8500 8500 8500 6336 1460 5000 5000 1460 750 750 1460 1500 1500 1460 3000 3000 1460 3121 3121 1460 3121 3121		Management Improvements	1408		6759		6759	6678.30	
1411 1500 1500 1430 2500 2500 2500 2500 8500 1450 8500 8500 1460 6336 6336 1460 750 750 1460 1500 1500 1460 3000 3000 1460 3121 3121 1460 3121 3121		Administration	1410		3030		3030	1129	
nd Costs 1430 2500 2500 g for Capitan 1450 8500 8500 8500 n Cabinets 1460 6336 6336 6336 Heaters 1460 5000 5000 750 Prators 1460 1500 1500 1500 Prators 1460 3000 3000 3000 Proors 1460 3121 3121 3121		Audit Costs	1411		1500		1500	0	
g for Capitan 1450 8500 8500 n Cabinets 1460 6336 6336 6336 Heaters 1460 5000 5000 750 Prators 1460 1500 1500 1500 Proors 1460 3000 3000 3121 3121 3121		Fees and Costs	1430		2500		2500	1952.16	
n Cabinets 1460 6336 6336 Heaters 1460 5000 5000 1460 750 750 Perators 1460 1500 1500 1500 3000 3000 3000 1460 3121 3121 3121		Parking for Capitan	1450		8500		8500	5115	
Heaters 1460 5000 5000 1460 750 750 2750 1500 1500 2750 1500 1500 2750 1270 3000 2750 3121 3121 2750 3121 3121		Kitchen Cabinets	1460		6336		6336	6280.23	
1460 750 750 erators 1460 1500 1500 pr Doors 1460 3000 3000 1460 3121 3121 3121		Water Heaters	1460		5000		5000	6202.33	
1460 1500 1500 1460 3000 3000 1460 3121 3121 3121 3121 3121		Stoves	1460		750		750	1756.88	
1460 3000 3000 1460 3121 3121 3121 3121		Refrigerators	1460		1500		1500	3569.92	
1460 3121 3121		Exterior Doors	1460		3000		3000	1864.26	
11000		Storage Doors	1460		3121		3121	0	
14000 14000		504 Compliance	1460		14000		14000	12664.97	
Interior Doors 1460 4500 4500 3103.30		Interior Doors	1460		4500		4500	3103.30	
Storage Unit 1470 4800 4800 4800		Storage Unit	1470		4800		4800	4800	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages PHA Name:		Grant T	Grant Type and Number			Federal	Federal FFY of Grant:		
	700	Capital F CFFP (Y Replacen	Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	ork	Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
									1
									T
1 To be com	To be completed for the Darformense and Europeation Deposit on Designed Assembly Continuent	annet or o	Daniand Annual Contents						

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund	Financing Program			
PHA Name: Eastern Regional Housing Authority	l Housing Authority				Federal FFY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Fund (Quarter F	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
U	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NM02P063	08/2008	08/2008	08/2010	08/2010	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

	Orig Obligat D:	Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Development Number Name/PHA-Wide (Quarter Ending Date)	
	ligation	rogram	
	Original Expenditure A	All Funds Expended (Quarter Ending Date)	
	Actual Expenditure End Date	pended ng Date)	
		Federal FFY of Grant: Reasons for Revised Target Dates ¹	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program—Five-Year Action Plan

7	L.	K.		J.	I.	H.	G.	F.	E.		D.	C.	ъ.	>	•	PHA	Par
Grand Total	Total Non-CFP Funds	Total CFP Funds	Debt Service	Capital Fund Financing -	Development	Demolition	Operations	Other	Administration	Structures and Equipment	PHA-Wide Non-dwelling	Management Improvements	Physical Improvements Subtotal	Name	Development Number and	PHA Name/Number	Part I: Summary
													Annual Statement	for Year 1 FFY 2010	Work Statement		
150352							70000	6500	5000			7260	61592	FFY_2011	0	Locality (City/	
150352							70000	6500	5000			5000	63852	FFY 2012	Work Statement for Year 3	Locality (City/County & State)	
150352							70000	6500	5000			5000	63582	FFY_2013	-	Original 5-Year Plan	
150352							70000	6500	5000			5000	6582	FFY_2014_	Work Statement for Year 5		

				17			震震				Statement	Annual	See			2010	Year 1 FFY	Statement for	Work	Part II: Sup
Subt								Dwelling Structures	Fees & Costs	Audit	Administration	Management Improv	Operations	Major Work Categories	Canaral Description of	Number/Nome	Development	H	Work Sta	Part II: Supporting Pages - Physical Needs Work Statement(s)
Subtotal of Estimated Cost																	Ouantity	FFY 2011	Work Statement for Year2	al Needs Work States
\$ 150352								61592	5000	1500	5000	7260	70000				Estimated Cost			ment(s)
Su								Dwelling Structure	Fees & costs	Audit	Administration	Management Impro	Operations	Major Work Categories	General Description of	Number/Name	Development		Work S	
Subtotal of Estimated Cost																,	Quantity	FFY 2012	Work Statement for Year:3	
\$150352								63852	5000	1500	5000	5000	70000				Estimated Cost			

										4	Statement	Annual	See		Year 1 FFY	Statement for	Work	Part II: Sup
Subt								Dwelling Structure	Fees & costs	Audit	Administration	Management Impro	Operations	General Description of Major Work Categories	Development Number/Name	Ŧ	Work Sta	Part II: Supporting Pages - Physical Needs Work Statement(s)
Subtotal of Estimated Cost	_														Quantity	FFY 2013	Work Statement for Year4	al Needs Work State
\$150352								63852	5000	1500	5000	5000	70000		Estimated Cost			ment(s)
Sub								Dwelling Structure	Fees & costs	Audit	Administration	Management Impro	Operations	General Description of Major Work Categories	Development		Work S	
Subtotal of Estimated Cost															Quantity	FFY 2014	Work Statement for Year:5	
\$150352								63852	5000	1500	5000	5000	70000		Estimated Cost			